## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** DOCUMENT # F93000004111 Mar 24, 2000 8:00 am 1. Entity Name **Secretary of State** HENDRY INVESTMENTS, INC. 03-24-2000 90120 023 \*\*\*150.00 Principal Place of Business Mailing Address 402 EAST RAMSEY ROAD 402 EAST RAMSEY ROAD SAN ANTONIO TX 78216 SAN ANTONIO TX 78216-4637 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 74-1797098 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Peter J. Kelly EVANS, THOMAS P Street Address (P.O. Box Number is Not Acceptable) 201 North Franklin, #2200 501 EAST KENNEDY BLVD., SUITE 1400 **TAMPA FL 33602** Zip Code Tampa 33602 8. The above named entity bmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATUR ent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition Change TITLE ☐ Delete TITLE NAME HENDRY, JOHN L III STREET ADDRESS STREET ADDRESS 402 EAST RAMSEY ROAD CITY-ST-ZIP CITY-ST-ZIP SAN ANTONIO TX 78216 **VDAS** TITLE Change ☐ Addition ☐ Delete TITLE NAME HENDRY, STUART C NAME STREET ADDRESS STREET ADDRESS **402 EAST RAMSEY ROAD** CITY-ST-7IP CITY-ST-ZIP SAN ANTONIO TX 78216 ☐ Addition Change TITLE VDST Delete TITLE HOOPER, CHARLES N NAME NAME STREET ADDRESS STREET ADDRESS 402 EAST RAMSEY ROAD CITY-ST-ZIP CITY-ST-ZIP SAN ANTONIO TX 78216 Change ☐ Addition **VD** . . . , ☐ De'ete TITLE TITLE NAME DENTON, JAMES NAME STREET ADDRESS STREET ADDRESS **402 EAST RAMSEY ROAD** CITY-ST-ZIP CITY-ST-ZIP SAN ANTONIO TX 78216 Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

210/341-2227